## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

ITALIAN AMERICAN WAR VETERANS OF THE UNITED STATES, INC. POST 4 ORLANDO, FLORIDA

## **FILED** Feb 04 1998 8:00am Secretary of State

FALLINA MERICAN SOCIAL CLUB   P.O. BOX 57876   ORANDO F1, 23857-4976 US	Principal Plac	e of Business	Mailing Address			
CRIANDO FL 2857-411   US						3. Date Incorporated or Qualified
US 2. Principal Place of Business 2. A Mailing Address 2. Principal Place of Business 2. Suite Apt 4, etc. 2. Suite Apt 4, etc. 3. Suit						03/05/1985
2. Mainting Actives   2. Sum Mainting Acti		2037-4111	03			4. FEI Number Applied For
Suite, Apt. 4, etc.  Suite, Apt. 6, etc.  Suite, Ap						59-2597227 Not Applicable
Suite, Apt. 4, etc.   27						1 2. Certificate di Status Desired
City & State    City & State   City						
City & State   City & State   City & State   City & State   23   Country   23   Country   23   Country   25   Country   27   Country   27   Country   28   Country   29			<del>-</del>			
25						
Zip   Country   Zip   Country   Zip   Country   B. This opposition owes or has paid the current year intangular	<b>—</b> ·		—			
S. Name and Address of Current Registered Agent   St Name and Address of New Registered Agent		Country	Zip	Coun	try	8. This corporation owes or has paid the current year Intangible
GIORDANO, CHET 718 GLEN EAGLE DR WINTER SPRINGS FL 32708  82   Street Address (P.O. Box Number is Not Acceptable)  71. Pursuant to the provisions of Sections 617 0502 and 617, (508, Portida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Piorida Statutes  SIGNATURE  12. OFFICERS AND DIRECTORS  13. INC.  14. INC.  15. INC.  16. GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GIORDANO, CHET 718 GLEN EAGLE DR  15. TITLE  VD  GRANDO FL  TITLE  VD  GRANDO FL  TITLE	24	25	29	30		Personal Property Tax due June 30. Yes X No
GIORDANO, CHET 718 GLEN EAGLE DR WINTER SPRINGS FL 32708  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent an immunifier with, and accept the obligations of, Sections 617,0508 and 617,1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent an immunifier with, and accept the obligations of, Sections 617,0508 and 617,1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and immunifier with a section of 17,0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and immunifier with a section of 17,0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligation of 17,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligation of 17,0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligation of 17,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligation of 17,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligation of 17,0508, Florida Statutes, the above-named corporation of directors. I hereby accept the appointment as registered agent and accept the obligation of 17,0508, Fl		9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
THE GLEN EAGLE DR WINTER SPRINGS FL 32708  83  84 City FL 88 Zip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered defending the manual manual was registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the state of the purpose of changing its registered agent.  ITHE PD	İ			8	11 Name	
WINTER SPRINGS FL 32708    83	GIORDANO, CHET			Ē	2 Street Add	dress (P.O. Box Number is Not Acceptable)
Section   Sections of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617,0503, Florida Statutes.    Significant   Section   S	718 GLE	n eagle dr		_		
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of, Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of Section 617,0503, Proficed Statutors, agent. I am familiar with, and accept the obligations of Proficed Statutors, agent and accept the obligations of Proficed Statutors, agent agent agent and statutors, agent a	WINTER	SPRINGS FL 32708		3	3	
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am lamilar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE    Signature				8	4 City	85 Zip Code
SIGNATURE   Signature, hyber or printed name of registricid againt and site if applicable   (NOTE, Projectional Againt signature required when refinishing)   DATE						
SIGNATURE   Signature, hyber or printed name of registricid againt and site if applicable   (NOTE, Projectional Againt signature required when refinishing)   DATE	office or r	to the provisions of Sections 617,051 egistered agent, or both, in the State	02 and 617.1508, Florida Stal e of Florida. Such change we	itutes, the abo as authorized	ive-named coi by the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
Signature, hyper or printed harms of registered agent and tilled applicables. (NOTE: Projectived Agent signature required when refereishing):   DATE     13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	agent. La:	m familiar with, and accept the oblig	jations of, Section 617.0503,	Florida Statut	es.	•
TILE PD	SIGNATURE .		and and title if any land in	now because i	Tarabura da	DATE
TITLE					deut arhumana tedo	
NAME   GIORDANO, CHET   12 NAME   13 STREET ADDRESS   14 CITY-ST-ZIP   TITLE   Change   Addition	<del></del>				: "	
STREET ADDRESS   TAB GLEN EAGLE DR	NAME	• •		1.2 NAM	E	
CITY-ST-ZIP	STREET ADDRESS	•		1,3 STRE	ET ADDRESS	
TITLE	CITY-ST-ZIP			1		
STREET ADDRESS   2019 SANTA ANTILLES RD	TITLE	VD	DELETE			Change Addition
CITY-ST-ZIP	NAME	FINELLA, ALEXANDER		2.2 NAM	E	
TITLE TD DELETE 3.1 TITLE DELETE 3.1 TITLE Addition NAME MALENA, RICHARD 3.2 NAME STREET ADDRESS 11065 CRESCENT BAY BLVD 3.3 STREET ADDRESS CITY-ST-ZIP CLERMONT FL 3.4 CITY-ST-ZIP TITLE SD DELETE 4.1 TITLE Change Addition NAME SYRING, LAVERNE 4.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS 6.4 CITY-ST-ZIP  TITLE DELETE 6.1 TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP  TITLE GLADETE 6.1 TITLE GLADETE G.1 NAME STREET ADDRESS 6.4 CITY-ST-ZIP  STREET ADDRESS 6.4 CITY-ST-ZIP  TITLE GLADETE 6.1 TITLE G.1 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS 6.4 CITY-ST-ZIP  STREET ADDRESS 6.4 CITY-ST-ZIP  TITLE G.2 NAME STREET ADDRESS 6.4 CITY-ST-ZIP  STREET ADDRESS 6.4 CITY-ST-ZIP	STREET ADDRESS	2019 SANTA ANTILLES RD		2.3 STRE	ET ADDRESS	
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STREET ADDRESS   11065 CRESCENT BAY BLVD   3.3 STREET ADDRESS   CLERMONT FL   3.4 CITY-ST-ZIP	TITLE	מז	☐ DELETE	3.1 TITLE	:	Change Addition
CITY-ST-ZIP	NAME	MALENA, RICHARD		3.2 NAM	<b>E</b> [	
TITLE SD DELETE 4.1 TITLE Change Addition  NAME SYRING, LAVERNE  STREET ADDRESS 8212 CASCADE OAKS DR  CITY-ST-ZIP ORLANDO FL  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  S1 TITLE  DELETE  5.1 TITLE  S2 NAME  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  OBLIETE  6.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  OBLIETE  6.4 CITY-ST-ZIP  CHange  Addition  Addition	STREET ADDRESS	11065 CRESCENT BAY BLVD	)	3.3 STRE	ET ADDRESS	
NAME   SYRING, LAVERNE   4.2 NAME   8212 CASCADE OAKS DR   4.3 STREET ADDRESS   CITY-ST-ZIP   ORLANDO FL   DELETE   5.1 TITLE   Change   Addition   Addition   S.2 NAME   STREET ADDRESS   CITY-ST-ZIP   TITLE   DELETE   5.4 CITY-ST-ZIP   TITLE   Change   Addition   Addition   Change   Addition   Addition   Change   Addition   Change   Addition   Change   Addition   Change   Addition   Change   Companies   CITY-ST-ZIP   Change   Addition   Change   Companies   CITY-ST-ZIP   Change   C	CITY-ST-ZIP					
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TITLE	STREET ADDRESS			4.3 STRE	ET ADDRESS	
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- Fig. 1 DOLODA DERINA CHARACTER RECORDED AND THE COESTINA CHARACTER OF PROCEEDINGS OF THE CONTRACT TO THE CONTRACT OF THE CON		ertify that the information supplied w	vith this filing does not qualify			n Section 119,07(3)(i). Florida Statutes, I further certify that the information

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 in Changed, or on an attachment with an address.

352 394-B998